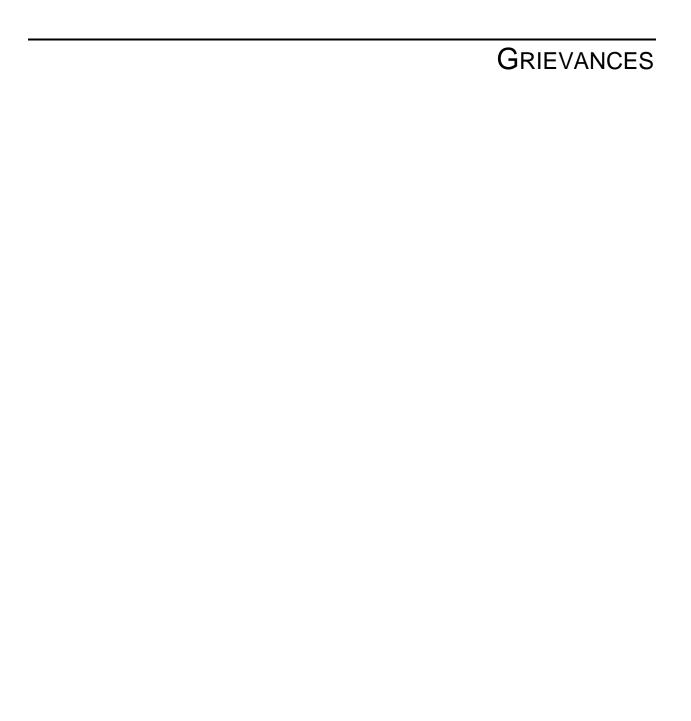
# SOUTHERN YOUTH CORRECTIONAL RECEPTION CENTER AND CLINIC



Prepared by:

California Department of Corrections and Rehabilitation Office of Audits and Compliance



Division of Juvenile Justice, Safety and Welfare Remedial Plan: Youth Grievance Temporary Departmental Order 07-92, Special Master Reports, and the Court Appointed Experts Reports.

Office of Audits and Compliance Staff Gil DeLyon, Captain

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#### **EXECUTIVE SUMMARY**

The Office of Audits and Compliance, Compliance/Peer Review Branch (CPRB) reviewed Southern Youth Correctional Reception Center and Clinic's (SYCRCC) Youth Grievance Temporary Departmental Order (TDO) 07-92 and the Safety and Welfare Remedial Plan, Section 8.5 (Grievances) to determine whether SYCRCC is in compliance with the grievance system policies and identified areas outlined in the Safety and Welfare Remedial Plan.

The review of the Safety and Welfare Remedial Plan was conducted during the period of August 24 through August 26, 2009. During this period, the CPRB reviewed electronic mail and memorandum correspondence, Ward Information Network (WIN) documentation, time frames, corrective action, training records, and monthly grievance reports submitted to the Division of Juvenile Justice (DJJ) Central Office by SYCRCC.

The findings are as follows:

For Section 8.5, Item 11a, SYCRCC is in partial compliance (PC). Not all direct care staff were trained in the grievance system. The CPRB reviewed training records and conducted staff interviews to determine that H1N1 training was provided in lieu of the grievance system training; therefore, only 65 percent of staff in the education, parole, and medical sections received the required training.

SYCRCC is in substantial compliance (SC) with the grievance system as outlined in the Safety and Welfare Remedial Plan, Section 8.5, Items 1, 2, 3, 4, 5a, 5c, 6, 7a, 7b, and 9.

#### **BACKGROUND**

On November 19, 2004, a Consent Decree was entered into in the case of *Farrell v. Allen*. The Consent Decree required the defendant, now the DJJ, to file Remedial Plans in all areas of deficiency identified by the Court appointed experts by January 31, 2005. In January 2005, in response to the Consent Decree, DJJ made the decision to reform California's juvenile system into a rehabilitative model based on a therapeutic environment.

The DJJ has established a Farrell Task Force Team to develop, implement, and measure compliance within the scope of the six Remedial Plans. As part of the Farrell Task Force, the CPRB is charged with assessing compliance and if applicable, recommending corrective actions related to the findings.

The CPRB will be reviewing specific action items that make up the six Remedial Plans. The action items that have been selected for review are based on risk to the Department. These issues include, but are not limited to, 18 items with a time sensitive date and key indicators. The review will be evaluated using a compliance rating system. Each action item will be evaluated by whether it is in SC 85 percent and above, PC 84 percent to 50 percent and non compliance (NC) 49 percent and below. Items that result in a yes or no compliance level will be rated as SC or NC. Items that cannot be rated will be categorized as not ratable (NR). Due to the diversity and occasional abstract content of the action items, a numeric rating system cannot always be utilized. As a result, a narrative rating system will be used to evaluate the level of compliance.

The specific objective of the review was to:

 Verify whether SYCRCC is in SC with grievances, as outlined in the Safety and Welfare Remedial Plan.

The CPRB determined whether the objectives were met by reviewing:

- Safety and Welfare Remedial Plan;
- Audit reports prepared by Court appointed experts;
- Audit reports prepared by the Special Master;
- Policies and TDOs:
- Correspondence between Central Office and facilities (electronic mail, memorandums, corrective action plans, etc); Monthly grievance and trend reports;

- Staff training records; and
- Information obtained through staff and youth interviews.

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Findings  | Recommendation(s)  | Reviewer's<br>Comments |
|----------|--------------|------|--|----|----|----|----|---|--|------------------------|
| 166      | 8.5          | 11a  | Action Item:  All direct care staff trained in grievance system.  Methodology:  Interviewed Facility Grievance Coordinator.  Reviewed and collected grievance in-service training rosters, living unit training sign-in sheets and Facility Grievance Coordinator training records.  Criteria:  TDO 07-92, page 45.  Safety and Welfare Remedial Plan, July 10, 2006, page 72. |    | X  |    |    | Partial Compliance  Not all direct care staff were trained in the grievance system.  Cause:  SYCRCC provided grievance training to staff. However, only 65 percent of the grievance system training for education, parole, and medical staff was completed.  The H1N1 training was provided in lieu of the grievance system training. Per the training officer, the grievance system training has been reestablished for the November block training. | Schedule make-up training and block training for direct care staff that have not yet received the required grievance training. |                        |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Reviewer's Comments |
|----------|--------------|------|--|----|----|----|----|---------------------|
| 151      | 8.5          | 1    | Action Item:  Forms available without assistance in all units.  Methodology:  The CPRB visited all six living units.  Reviewed the grievance folders: Grievances, Staff Misconduct, and Emergency Grievances.  Interviewed living unit staff, youth, and the Grievance Clerks.  Criteria:  TDO 07-92, page 6.  Safety and Welfare Remedial Plan, July 10, 2006, page 71. | X  |    |    |    |                     |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method                               | SC | PC | NC | NR | Reviewer's Comments                        |
|----------|--------------|------|---|----|----|----|----|--|
|          |              |      | Action Item:  |    |    |    |    | Grievance lock boxes have been in place on |
|          |              |      | Lock box for grievances in all living units.                    |    |    |    |    | the SYCRCC living units since March 2007.  |
|          |              |      | Methodology:  |    |    |    |    |  |
|          |              |      | The CPRB visited all six living units.                          |    |    |    |    |  |
| 152      | 8.5          | 2    | Viewed grievance lock boxes on all living units.                | Х  |    |    |    |  |
|          |              |      | Interviewed living unit staff, youth, and the Grievance Clerks. |    |    |    |    |  |
|          |              |      | Criteria:   |    |    |    |    |  |
|          |              |      | TDO 07-92, page 6.  |    |    |    |    |  |
|          |              |      | Safety and Welfare Remedial Plan,<br>July 10, 2006, page 71.    |    |    |    |    |  |

|     | Section | Item | Action Items and Reviewing Method   | SC | PC | NC | NR | Reviewer's Comments |
|-----|---------|------|---|----|----|----|----|---------------------|
| #   | #       |      |   |    |    |    |    |                     |
| 153 | 8.5     | 3    | Action Item:  Grievance Clerk ensures adequate supply of forms; educates/assists in process.  Methodology:  The CPRB visited all six living units.  Reviewed the grievance folders: Grievances, Staff Misconduct, and Emergency Grievances.  Collected the Youth Grievance Clerk duty statement.  Interviewed living unit staff, youth, and Grievance Clerks.  Criteria:  TDO 07-92, page 10. | X  |    |    |    |                     |
|     |         |      | Safety and Welfare Remedial Plan,<br>July 10, 2006, page 71.  |    |    |    |    |                     |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method   | SC | PC | NC | NR | Reviewer's Comments |
|----------|--------------|------|---|----|----|----|----|---------------------|
| 154      | 8.5          | 4    | Action Item:  Notice of receipt of grievance or allegation of misconduct.  Methodology:  Interviewed Facility Grievance Coordinator.  Collected notices of receipts for grievances and allegations of staff misconduct.  Criteria:  TDO 07-92, page 12. | X  |    |    |    |                     |
|          |              |      | Safety and Welfare Remedial Plan,<br>July 10, 2006, page 71.  |    |    |    |    |                     |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Reviewer's Comments  |
|----------|--------------|------|--|----|----|----|----|--|
| 155      | 8.5          | 5a   | Action Items:  Facility Grievance Coordinator prepares monthly reports.  Methodology:  Interviewed Facility Grievance Coordinator.  Reviewed monthly reports submitted by facilities to Central Office and collected reports as proof of practice (May, June, and July 2009).  Criteria:  TDO 07-92, page 43.  Safety and Welfare Remedial Plan, July 10, 2006, page 71. | X  |    |    |    | Each facility has one or more Grievance Coordinators who are required to prepare monthly reports on grievances and grievance trends for use by the Superintendent and his/her management team.  The Facility Grievance Coordinator is responsible for sending monthly reports to Central Office. These reports contain the monthly total of SYCRCC's staff misconduct, grievances, and trends. |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method   | SC | PC | NC | NR | Reviewer's Comments   |
|----------|--------------|------|---|----|----|----|----|---|
| 156      | 8.5          | 5b   | Action Item:  Design of grievance reports developed with the Court appointed expert.  Criteria:  Policy not required.   |    |    |    | X  | Not Ratable - This is a Central Office function.  |
| 157      | 8.5          | 5c   | Action Item:  Superintendent reviews all allegations of staff misconduct.  Methodology:  Interviewed Facility Grievance Coordinator.  Collected copies of the Superintendents "Staff Misconduct Complaint Review" forms with the Superintendents signatures.  Criteria:  Policy not required. | X  |    |    |    | Once the Superintendent reviews an allegation of staff misconduct, a copy of the inquiry report is sent to the Director's office and a hard copy is placed in the designated facility file.  The Directors office makes the final decision on alleged staff misconduct inquiries. |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Reviewer's Comments   |
|----------|--------------|------|--|----|----|----|----|---|
| 158      | 8.5          | 6    | Action Item:  Process developed to address abuse of grievance system.  Methodology:  Interviewed Facility Grievance Coordinator.  Collected notices that the WIN system generates to track abuse of the grievance system by youth.  Criteria:  TDO 07-92, page 7.  Safety and Welfare Remedial Plan, | X  |    |    |    | Any recorded abuse of the grievance system generates a notice through the WIN system. The notice identifies the abuse and any restriction.  Additionally, the Wards with Disabilities Coordinator, Grievance Coordinator, and the staff assistants are available to assist youths with disabilities to understand the grievance system and the process needed to file grievances. |
|          |              |      | July 10, 2006, page 71.  |    |    |    |    |   |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Reviewer's Comments  |
|----------|--------------|------|--|----|----|----|----|--|
| 159      | 8.5          | 7a   | Action Item:  Weekly and monthly monitoring reports automated.  Methodology:  Interviewed Facility Grievance Coordinator.  Collected reports that the WIN system generates. Reviewed scanned copies that track all grievances and complaints alleging staff misconduct.  Criteria:  TDO 07-92, pages 42 and 44.  Safety and Welfare Remedial Plan, July 10, 2006, page 71. | X  |    |    |    | DJJ has developed an automated grievance tracking system.  Facilities scan, track, and monitor all grievances and complaints alleging staff misconduct, as well as, compiling data to present to local management.  Central Office has developed queries for the WIN system that helps Facility Grievance Coordinators monitor grievances, collect data, and complete their monthly reports. |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method   | SC | PC | NC | NR | Reviewer's Comments  |
|----------|--------------|------|---|----|----|----|----|--|
| 160      | 8.5          | 7b   | Intervention strategies developed in response to trends.  Methodology: Interviewed Facility Grievance Coordinator.  Reviewed and collected electronic mail and memorandum correspondence discussing trends between SYCRCC and Central Office.  Reviewed the standardized trend reporting form and collected scanned copies of grievances, emergency grievances, and alleged staff misconduct grievances.  Criteria:  TDO 07-92, page 43.  Safety and Welfare Remedial Plan, July 10, 2006, page 71. | X  |    |    |    | The facility scans, tracks, and monitors allegations of staff misconduct.  Central Office has the ability to monitor all grievances and complaints alleging staff misconduct through the WIN system.  Facility Grievance Coordinators monitor grievances and discuss trends with facility management and with Central Office in their monthly reports. |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Reviewer's Comments                              |
|----------|--------------|------|--|----|----|----|----|--|
| 161      | 8.5          | 8a   | Action Items:  Central Office review of grievance response/timeframes.  Criteria:  TDO 07-92, page 44.  Safety and Welfare Remedial Plan, July 10, 2006, page 72.    |    |    |    | Х  | Not Ratable - This is a Central Office function. |
| 162      | 8.5          | 8b   | Action Item:  Central Office collection and evaluation of grievance data.  Criteria:  TDO 07-92, page 44.  Safety and Welfare Remedial Plan, July 10, 2006, page 72. |    |    |    | X  | Not Ratable - This is a Central Office function. |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Reviewer's Comments   |
|----------|--------------|------|--|----|----|----|----|---|
|          |              |      | Action Item:  Central Office assistance in corrective action plans.  |    |    |    |    | Not Ratable - This is a Central Office function.  |
| 163      | 8.5          | 8c   | Criteria:  Policy not required.  Safety and Welfare Remedial Plan, July 10, 2006, page 72.   |    |    |    | X  |   |
| 164      | 8.5          | 9    | Action Item:  Standard duty statement for Grievance Coordinator.  Methodology:  Interviewed DJJ staff.  Collected duty statements for the Facility Grievance Coordinator. The duty statement listed the responsibilities and requirements of the position.  Criteria:  Procedure not policy. | X  |    |    |    | Central Office provided duty statements to the Division Grievance Coordinators and the Facility Grievance Coordinators; listing the responsibilities and requirements of the positions. |

| DJJ<br># | Section<br># | Item | Action Items and Reviewing Method  | SC | PC | NC | NR | Reviewer's Comments                              |
|----------|--------------|------|--|----|----|----|----|--|
|          |              |      | Action Item: Grievance Coordinators trained for duties. Criteria:              |    |    |    |    | Not Ratable - This is a Central Office function. |
| 167      | 8.5          | 11b  | TDO 07-92, page 45.  Safety and Welfare Remedial Plan, July 10, 2006, page 72. |    |    |    | X  |  |

# Review of the Safety and Welfare Remedial Plan Southern Youth Correctional Reception Center and Clinic <u>GLOSSARY</u>

| CPRB   | Compliance/Peer Review Branch                           |
|--------|---|
| DJJ    | Division of Juvenile Justice                            |
| NC     | Non Compliance  |
| NR     | Not Ratable   |
| PC     | Partial Compliance                                      |
| SC     | Substantial Compliance                                  |
| SYCRCC | Southern Youth Correctional Reception Center and Clinic |
| TDO    | Temporary Departmental Order                            |
| WIN    | Ward Information Network                                |